

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

February 7, 1989

FEB 2 1 89

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

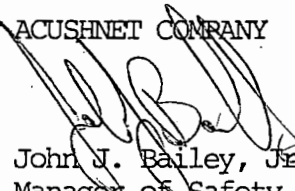
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of January 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

see INSTRUCTIONS on back

Telephone number (including area code)

(2-3) MA	(4-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21)	(22-23)	(24-25)
8 9	0 1	0 1
YEAR	MO	DAY

TO

(26-27)	(28-29)	(30-31)
8 9	0 1	3 1
YEAR	MO	DAY

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis.

RECEIVED - EPA
FEB 22 1989
COMPLIANCE BRANCH

PARAMETER		(3 card only) QUANTITY			UNITS	NO. EX	(4 card only) CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM			MINIMUM	AVERAGE	MAXIMUM				
FLOW	REPORTED	.129	.133	.270	MGD							30/30	24 Hr. composite
	PERMIT CONDITION												
OIL & GREASE	REPORTED		0.06		LBS/ Day							1/30	24 Hr. composite
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		0.11		LBS/ DAY							1/30	24 Hr. composite
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							2.02			0	1/30	24 Hr. composite
	PERMIT CONDITION							MONITOR		MG/L			
PH	REPORTED							7.2			6	12/30	24 hr. composite
	PERMIT CONDITION						6.5		8.0	STD UNITS			
C.R.	REPORTED							<0.05			0	1/90	24 hr. composite
	PERMIT CONDITION							0.3		MG/L			
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Jepson John		Exec. Vice President & Chief Operating Officer		8 8 02 0 7			
LAST	FIRST	MI	TITLE	YEAR	MO		

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.
2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
Example: $2.5 \text{ MGD} \times 30 \text{ mg/l BOD} \times 8.34 = 625.5 \text{ lb BOD/day}$
 - c. MGD equals gallons per minute times 1440.
3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
(other units may be used as necessary)
4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.
5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".
6. Specify sample type ("grab" or "___hr. composite")
If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

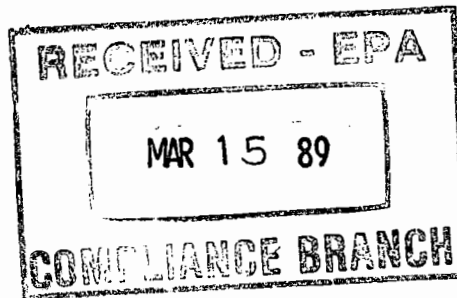
Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

**ACUSHNET COMPANY
RUBBER DIVISION**

Manufacturers of Elastomeric Products

March 8, 1989



Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

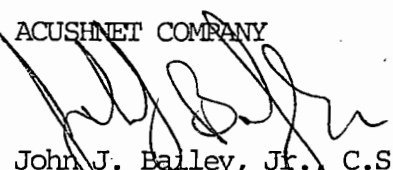
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of February 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY



John J. Bailey, Jr. C.S.P.
Manager of Safety and Security

/rg

Enc.

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

Telephone number (including area code)

(2-3) MA	(4-10) 0003913	(17-19) 001
(5) ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

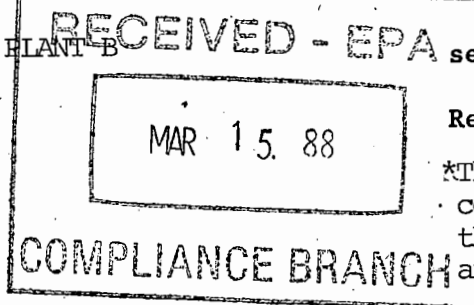
(20-21) 8	(22-23) 9	(24-25) 0
YEAR	MO	DAY

TO

(26-27) 8	(28-29) 9	(30-31) 0
YEAR	MO	DAY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

DISCHARGE MONITORING REPORT



see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory

The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis.

Form Approved
OMB NO. 158-R0073

PARAMETER		(3 card only)				UNITS	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	QUANTITY		MINIMUM	AVERAGE	MAXIMUM	CONCENTRATION				
FLOW	REPORTED	.176	.154	.270	MGD							30/30	24 hr. composite	
	PERMIT CONDITION													
OIL AND GREASE	REPORTED		0.72		LBS/Day							1/30	24 hour composite	
	PERMIT CONDITION		3.3	9.3										
T.S.S.	REPORTED		0.18		LBS/DAY							1/30	24 hour composite	
	PERMIT CONDITION		9.0	18.0										
C.O.D.	REPORTED						1.15			MG/L	0	1/30	24 hour composite	
	PERMIT CONDITION						MONITOR							
P.H.	REPORTED						6.5	6.6	6.7	STD. UNITS	6	12/30	24 hour composite	
	PERMIT CONDITION						6.5		8.0					
CR	REPORTED						0.05			MG/L	0	1/90	24 hour composite	
	PERMIT CONDITION								0.3					
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

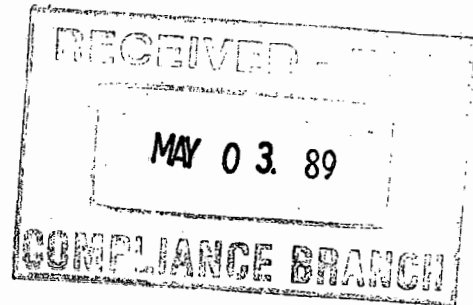
NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Dubiel Robert			President			89 03 08				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

**ACUSHNET COMPANY
RUBBER DIVISION**

Manufacturers of Elastomeric Products

April 24, 1989

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203



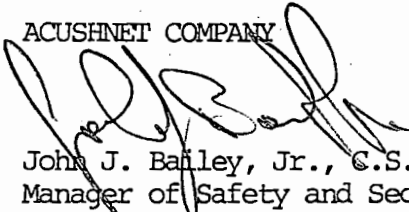
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of April 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RECEIVED - EPA

MAY 0 / 1989

COMPLIANCE BRANCH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 159-R0073

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02742
State/Zip code

see INSTRUCTIONS on back

Telephone number (including area code) 508-997-2811

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

(2-3) MA	(4-10) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 04	(26-27) 0	(28-29) 1
YEAR	MO	DAY	YEAR	MO

TO

(30-31) 8	(32-33) 9	(34-35) 04	(36-37) 3	(38-39) 0
YEAR	MO	DAY	YEAR	MO

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	CONCENTRATION			MINIMUM	AVERAGE	MAXIMUM					
FLOW	REPORTED	.232	.262	.266	MGD						0	30/30	24 hr continuous		
	PERMIT CONDITION														
OIL & GREASE	REPORTED		.13		LBS/DAY										
	PERMIT CONDITION		3.3	9.3											
T.S.S.	REPORTED		.22		LBS/DAY										
	PERMIT CONDITION		9.0	18.0											
C.O.D.	REPORTED						10.97			MG/L	0	1/30	24 hr composite		
	PERMIT CONDITION						MONITOR								
PH	REPORTED						6.9	7.1	7.3	STD. Units	2	12/30	24 hr composite		
	PERMIT CONDITION						6.5		8.0						
CR	REPORTED						< 0.05			MG/L		1/90	24 hr composite		
	PERMIT CONDITION						0.3								
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, ROBERT			President			8 9 04 216				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

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Example: $2.5 \text{ MGD} \times 30 \text{ mg/l BOD} \times 8.34 = 625.5 \text{ lb BOD/day}$
 - c. MGD equals gallons per minute times 1440.
3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
 $\text{kg/day} = \text{kilograms/day} = \frac{\text{lb/day}}{2.2}$
(other units may be used as necessary)
4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.
5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".
6. Specify sample type ("grab" or "hr. composite")
If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

April 24, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

RECEIVED - EPA

MAY 05 1989

COMPLIANCE BRANCH

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of April 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
 Street 744 Belleville Ave.
 City New Bedford, MA 02742
 State/Zip code

Telephone number (including area code) 508-997-2811

(12-31) MA	(14-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 04
YEAR	MO	DAY

TO

(26-27) 8	(28-29) 9	(30-31) 04
YEAR	MO	DAY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT

RECEIVED - EPA
 MAY 05 1989
 COMPLIANCE BRANCH

Form Approved
 OMB NO. 158-R0073

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
 *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

PARAMETER		(3 card only) QUANTITY				(4 card only) CONCENTRATION				FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		MINIMUM	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	REPORTED	.232	.262	.266	MGD					0	30/30	24 hr continuous
	PERMIT CONDITION											
OIL & GREASE	REPORTED		.13		LBS/DAY							
	PERMIT CONDITION		3.3	9.3								
T.S.S.	REPORTED		.22		LBS/DAY							
	PERMIT CONDITION		9.0	18.0								
C.O.D.	REPORTED						10.97		MG/L	0	1/30	24 hr composite
	PERMIT CONDITION						MONITOR					
PH	REPORTED					6.9	7.1	7.3	STD. Units	2	12/30	24 hr composite
	PERMIT CONDITION					6.5		8.0				
CR	REPORTED						< 0.05		MG/L		1/90	24 hr composite
	PERMIT CONDITION						0.3					
	REPORTED											
	PERMIT CONDITION											
	REPORTED											
	PERMIT CONDITION											

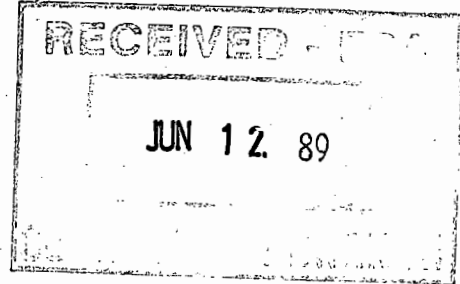
NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, ROBERT		President		8 9 04 2 16			
LAST	FIRST	MI	TITLE	YEAR	MO		

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

May 30, 1989

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203



MA0003913

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of April 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code) 508-997-2811

MA
ST

0003913

PERMIT NUMBER

001
DIS

REPORTING PERIOD: FROM

8 9 04 0 1
YEAR MO DAY

TO

8 9 04 3 0
YEAR MO DAY

PARAMETER		QUANTITY			UNITS	CONCENTRATION			UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM			
FLOW	REPORTED	.120	.311	.498	MGD					0 30/30	24 hour continuous
	PERMIT CONDITION										
OIL & GREASE	REPORTED		3.36		LBS/DAY						
	PERMIT CONDITION	3.3		9.3							
T.S.S.	REPORTED		3.36		LBS/DAY						
	PERMIT CONDITION	9.0		18.0							
C.O.D.	REPORTED						1.73		MG/L	0 1/30	24 hour composite
	PERMIT CONDITION						MONITOR				
PH	REPORTED					5.7	6.2	6.6	STD. UNITS	2 12/30	24 hour composite
	PERMIT CONDITION					6.5		8.0			
C.R.	REPORTED						< 0.05		MG/L	1/90	24 hour composite
	PERMIT CONDITION							0.3			
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, Robert		President		8 9 05 3 11			
LAST	FIRST	MI	TITLE	YEAR	MO	DAY	

RECEIVED - EPC
JUN 13 1989
COMPLIANCE BRANCH

THIS DMR LOOKS TO
BE FOR THE MONTH OF MAY.

1943 - JUNE 30
L. A. 1410
DMD-3011-10

Facility or discharge location

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Telephone number (including area code) 508-997-2811

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

(2-3) MA	(4-10) 0003913	(17-19) 001
(5) ST	PERMIT NUMBER	(15) DIS

PH RETEST

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 04	(26-27) 01
YEAR	MO	DAY	

TO

(28-29) 8	(30-31) 9	(32-33) 04	(34-35) 30
YEAR	MO	DAY	

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		QUANTITY			CONCENTRATION										
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM						
FLOW	REPORTED	.120	.311	.498	MGD							0	30/30	24 hour continuous	
	PERMIT CONDITION														
OIL & GREASE	REPORTED		3.36		LBS/DAY										
	PERMIT CONDITION	3.3		9.3											
T.S.S.	REPORTED		3.36		LBS/DAY										
	PERMIT CONDITION	9.0		18.0											
C.O.D.	REPORTED											0	1/30	24 hour composite	
	PERMIT CONDITION														
PH	REPORTED					6.2	6.5	6.7	STD. UNITS		2	12/30	24 hour composite		
	PERMIT CONDITION					6.5		8.0							
C.R.	REPORTED						< 0.05		MG/L			1/90	24 hour composite		
	PERMIT CONDITION							0.3							
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, Robert			President			8 9 0 5 31				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

May 30, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

RECEIVED - EPA
JUN 13 1989
COMPLIANCE BRANCH

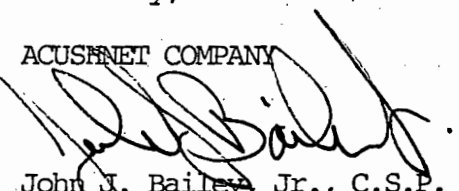
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Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 17, 1989

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

RECEIVED - EPA
AUG 21 1989
COMPLIANCE BRANCH

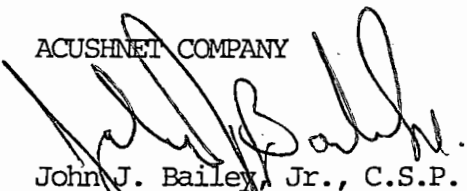
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of May 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

RECEIVED - EPA

AUG 21 1989

Remarks Titleist Golf Division Laboratory
* The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code)

MA	0003913
ST	PERMIT NUMBER

001
DIS

REPORTING PERIOD: FROM

8	9	0	5	01
YEAR	MO	DAY		

to

8	9	0	5	31
YEAR	MO	DAY		

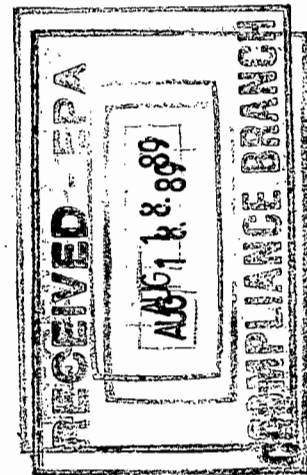
COMPLIANCE BRANCH

PARAMETER		QUANTITY				UNITS	CONCENTRATION				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MAXIMUM						
FLOW	REPORTED	.79	.154	.263	MGD						0	30/30	24 hour continuous	
	PERMIT CONDITION													
OIL & GREASE	REPORTED		.68		Lbs/Day									
	PERMIT CONDITION	3.3		9.3										
T.S.S.	REPORTED		.13		Lbs/Day									
	PERMIT CONDITION	9.0		18.0										
C.O.D.	REPORTED									MG/L	0	1/30	24 hour composite	
	PERMIT CONDITION							Monitor						
PH	REPORTED						6.2	6.6	6.7	Std. Units	2	12/30	24 hour composite	
	PERMIT CONDITION						6.5		8.0					
C.R	REPORTED							> 0.05		MG/L		1/90	24 hour composite	
	PERMIT CONDITION								0.3					
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE	
Dubiel Robert		President		89 0 18 1 7	
LAST	FIRST	MI	TITLE	YEAR	MO DAY

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT



RECEIVED

AUG 18 89

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

August 17, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

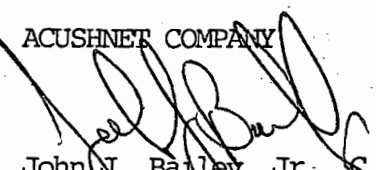
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of May, 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT**

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name **ACUSHNET COMPANY-RUBBER DIVISION-PLANT B**
Street **744 Belleville Ave.**
City **New Bedford**
State/Zip code **MA 02742**

see INSTRUCTIONS on back

Telephone number (including area code)

(12-16) MA	(4-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

Remarks Titleist Golf Division Laboratory
* The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

REPORTING PERIOD: FROM

(20-21)	(22-23)	(24-25)
8	9	01
YEAR	MO	DAY

TO

(26-27)	(28-29)	(30-31)
8	9	31
YEAR	MO	DAY

PARAMETER		(3 card only)				UNITS	(4 card only)				UNITS	CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		QUANTITY			MINIMUM		CONCENTRATION			MINIMUM		CONCENTRATION		MAXIMUM				
		(30-43)	(44-53)	(54-61)			(40-53)	(54-61)	(62-63)			(64-70)						
FLOW	REPORTED	.79	.154	.263	MGD									0	30/30	24 hour continuous		
	PERMIT CONDITION																	
OIL & GREASE	REPORTED		.68		Lbs/Day													
	PERMIT CONDITION	3.3		9.3														
T.S.S.	REPORTED		.13		Lbs/Day													
	PERMIT CONDITION	9.0		18.0														
C.O.D.	REPORTED													0	1/30	24 hour composite		
	PERMIT CONDITION							Monitor										
PH	REPORTED						6.2	6.6	6.7	Std. Units			2	12/30	24 hour composite			
	PERMIT CONDITION						6.5		8.0									
C.R	REPORTED							> 0.05		MG/L				1/90	24 hour composite			
	PERMIT CONDITION								0.3									
	REPORTED																	
	PERMIT CONDITION																	
	REPORTED																	
	PERMIT CONDITION																	
NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER				DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.										
Dubiel Robert		President				89 0 18 1 7												
LAST FIRST MI		TITLE				YEAR MO DAY												

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 17, 1989

RECEIVED - EPA

AUG 21 1989

COMPLIANCE BRANCH

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203


Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 000391~~7~~001 for the month of June 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT**

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

RECEIVED - EPA

AUG 21 1989

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code)

(12-30) MA ST	(14-16) 0003913 PERMIT NUMBER	(17-19) 001 DIS
REPORTING PERIOD: FROM		
(20-21) 89 YEAR	(22-23) 06 MO	(24-25) 01 DAY

COMPLIANCE BRANCH

(26-27) 89 YEAR	(28-29) 06 MO	(30-31) 30 DAY
-----------------------	---------------------	----------------------

PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX	(4 card only) CONCENTRATION				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM						
FLOW	REPORTED	.137	.208	.425	MGD							0	30/30	24 Hour continuous	
	PERMIT CONDITION														
OIL & GREASE	REPORTED		.69		Lbs/ Day										
	PERMIT CONDITION														
T.S.S.	REPORTED		.34		Lbs/ Day										
	PERMIT CONDITION														
C.O.D.	REPORTED							1.66			Mg/L	0	1/30	24 Hour composite	
	PERMIT CONDITION														
PH	REPORTED							6.8	7.2	7.5	Std. Units	2	12/30	24 Hour composite	
	PERMIT CONDITION														
C.R.	REPORTED							>0.05			Mg/L		1/90	24 Hour composite	
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Dubiel Robert			President			89 08 17				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

August 17, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

RECEIVED - EPA

AUG 23 1989

COMPLIANCE BRANCH

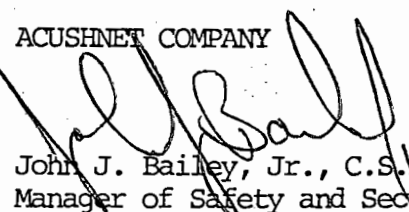
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of June 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT**

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY - RUBBER DIVISION - PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Telephone number (including area code)

(1-3) MA ST	(4-10) 0003913 PERMIT NUMBER	(17-19) 001 DIS
-------------------	------------------------------------	-----------------------

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 06	(26-28) 01
YEAR	MO	DAY	

TO

(20-21) 8	(22-23) 9	(24-25) 06	(26-28) 30
YEAR	MO	DAY	

RECEIVED
AUG 23 1989
COMPLIANCE BRANCH

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

PARAMETER		(3 card only)				UNITS	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	NO. EX		MINIMUM	AVERAGE	MAXIMUM					
FLOW	REPORTED	.137	.208	.425	MGD						0	30/30	24 Hour continuous	
	PERMIT CONDITION													
OIL & GREASE	REPORTED		.69		lbs/Day									
	PERMIT CONDITION													
T.S.S.	REPORTED		.34		lbs/Day									
	PERMIT CONDITION													
C.O.D.	REPORTED						1.66			Mg/L	0	1/30	24 Hour composite	
	PERMIT CONDITION						MONITOR							
PH	REPORTED						6.8	7.2	7.5	Std. Units	2	12/30	24 Hour composite	
	PERMIT CONDITION						6.5		8.0					
C.R.	REPORTED						>0.05			Mg/L		1/90	24 Hour composite	
	PERMIT CONDITION								0.3					
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER			DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.							
Dubiel Robert		President			8 9 08 1 7									
LAST FIRST MI		TITLE			YEAR MO DAY		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

August 30, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

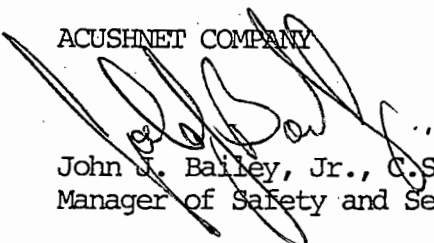
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of August 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

Facility or discharge location

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Telephone number (including area code) 508-997-2811

(2-3) MA	(4-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21) 89	(22-23) 08	(24-25) 01
YEAR	MO	DAY

TO

(26-27) 89	(28-29) 08	(30-31) 31
YEAR	MO	DAY

RECEIVED - EPA
SEP 12 1989
COMPLIANCE BRANCH

Remarks Titleist Golf Division Laboratory
The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		QUANTITY			CONCENTRATION										
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM						
FLOW	REPORTED	.99	.421	.433	MGD							0	30/30	24 hour continuous	
	PERMIT CONDITION														
OIL & GREASE	REPORTED		2.1		LBS/DAY										
	PERMIT CONDITION	3.3		9.3											
T.S.S.	REPORTED		1.05		LBS/DAY										
	PERMIT CONDITION	9.0		18.0											
C.O.D.	REPORTED				MG/L		11.9					0	1/30	24 hour composite	
	PERMIT CONDITION						MONITOR								
PH	REPORTED				STD. UNITS		7.8	7.9	8.1			2	12/30	24 hour composite	
	PERMIT CONDITION						6.5		8.0						
C.R.	REPORTED				MG/L		<0.05						1/90	24 hour composite	
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Dubiel, Robert		President		89 08 30			
LAST	FIRST	MI	TITLE	YEAR	MO		

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

August 30, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02214
Attn.: Mr. Jim Keleher

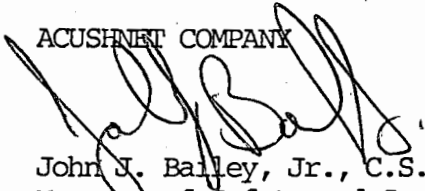
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of July 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RECEIVED - EPA
SEP 12 1989
COMPLIANCE BRANCH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford, MA
State/Zip code MA 02742

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code)

(12-31) MA	(14-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 07
YEAR	MO	DAY

TO

(26-27) 8	(28-29) 9	(30-31) 07
YEAR	MO	DAY

PARAMETER		(3 card only) QUANTITY (38-45)			UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (46-53)			UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM			MINIMUM	AVERAGE	MAXIMUM				
FLOW	REPORTED	.230	.428	.463	MGD						0	30/30	24 hour continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		1.78		LBS/ DAY								
	PERMIT CONDITION	3.3		9.3									
T.S.S.	REPORTED		2.14		LBS/ DAY								
	PERMIT CONDITION	9.0		18.0									
C.O.D.	REPORTED							1.84		MG/L	0	1/30	24 hour composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.7	8.0	8.3	STD UNITS	2	12/30	24 hour composite
	PERMIT CONDITION							6.5					
C.R.	REPORTED							<0.05		MG/L		1/90	24 hour composite
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Dubiel, Robert		President		8 9 0 8 3 0			
LAST	FIRST	MI	TITLE	YEAR	MO		

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 30, 1989

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

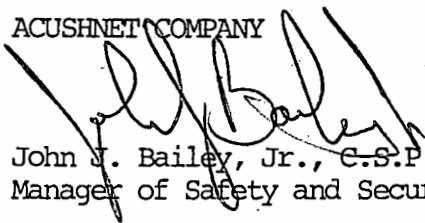
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of July 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford, MA
State/Zip code MA 02742

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code)

(2-3) MA	(4-16) 0003913
ST	PERMIT NUMBER

(17-19) 001
DIS

REPORTING PERIOD: FROM

(20-21) 8	(22-23) 9	(24-25) 07	(26-27) 0	(28-29) 1
YEAR	MO	DAY		

TO

(26-27) 8	(28-29) 9	(30-31) 07	(32-33) 3	(34-35) 1
YEAR	MO	DAY		

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		QUANTITY			CONCENTRATION										
		(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	(46-53) MINIMUM			(54-61) AVERAGE	(54-61) MAXIMUM						
FLOW	REPORTED	.230	.428	.463	MGD							0	30/30	24 hour continuous	
	PERMIT CONDITION														
OIL & GREASE	REPORTED		1.78		LBS/DAY										
	PERMIT CONDITION	3.3		9.3											
T.S.S.	REPORTED		2.14		LBS/DAY										
	PERMIT CONDITION	9.0		18.0											
C.O.D.	REPORTED							1.84				0	1/30	24 hour composite	
	PERMIT CONDITION							MONITOR							
PH	REPORTED						7.7	8.0	8.3	STD UNITS	2	12/30	24 hour composite		
	PERMIT CONDITION						6.5		8.0						
C.R.	REPORTED							<0.05		MG/L		1/90	24 hour composite		
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Dubiel, Robert			President			8 9 0 8 3 0				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.
2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1440.
3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
(other units may be used as necessary)
4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.
5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".
6. Specify sample type ("grab" or "hr. composite")
If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 30, 1989

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

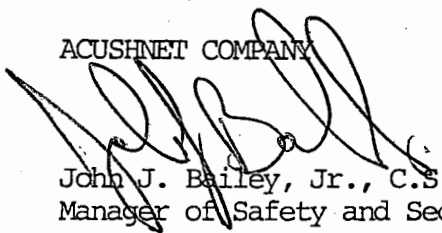
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of August 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY



John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

Facility or discharge location

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code) 508-997-2811

(2-3)
MA
ST

(4-16)
0003913
PERMIT NUMBER

(17-19)
001
DIS

REPORTING PERIOD: FROM

(20-21) (22-23) (24-25)
89 0 8 0 1
YEAR MO DAY

TO

(26-27) (28-29) (30-31)
8 9 0 8 3 1
YEAR MO DAY

PARAMETER		(3 card only)				UNITS	(4 card only)				UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	NO. EX		MINIMUM	AVERAGE	MAXIMUM	NO. EX			
FLOW	REPORTED	.99	.421	.433	MGD						0	30/30	24 hour continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		2.1		LBS/DAY								
	PERMIT CONDITION	3.3		9.3									
T.S.S.	REPORTED		1.05		LBS/DAY								
	PERMIT CONDITION	9.0		18.0									
C.O.D.	REPORTED						11.9			MG/L	0	1/30	24 hour composite
	PERMIT CONDITION						MONITOR						
PH	REPORTED						7.8	7.9	8.1	STD. UNITS	2	12/30	24 hour composite
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							<0.05		MG/L		1/90	24 hour composite
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER
Dubiel, Robert

LAST FIRST MI

TITLE OF THE OFFICER
President

TITLE

DATE
8 9 0 8 3 0

YEAR MO DAY

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.
2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1440.
3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
(other units may be used as necessary)
4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.
5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".
6. Specify sample type ("grab" or "hr. composite")
If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

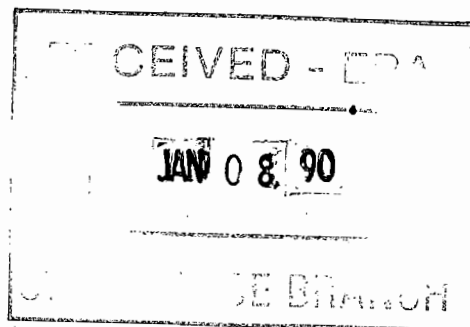
When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

November 2, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02114



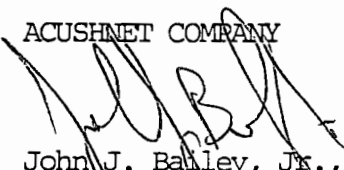
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of September 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

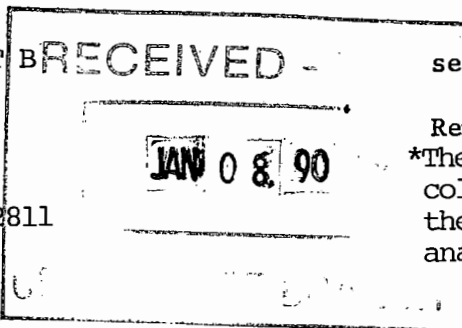
Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

ity or discharge location

ACUSHNET COMPANY-RUBBER DIVISION-PLANT
744 Belleville Ave.
New Bedford
State/zip code MA 02742



see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code) 508-997-2811

(2-3) MA	(4-10) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM

(20-21) 89	(22-23) 09	(24-25) 01
YEAR	MO	DAY

TO

(26-27) 89	(28-29) 09	(30-31) 30
YEAR	MO	DAY

Flow 234400

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		QUANTITY			CONCENTRATION									
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
FLOW	REPORTED	.138	.223	.737	MGD							0	30/30	24 hour continuous
	PERMIT CONDITION													
OIL & GREASE	REPORTED		0.2		LBS/DAY									
	PERMIT CONDITION	3.3		9.3										
T.S.S.	REPORTED		0.9		LBS/DAY									
	PERMIT CONDITION	9.0		18.0										
C.O.D.	REPORTED				MG/L			4.12				0	1/30	24 hour composite
	PERMIT CONDITION							MONITOR						
PH	REPORTED				STD. UNITS		6.2	7.5	7.5			2	12/30	24 hour composite
	PERMIT CONDITION						6.5		8.0					
C.R.	REPORTED				MG/L			<0.05					1/90	24 hour composite
	PERMIT CONDITION								2.3					
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, Robert			President			1/10 25/89				
LAST	FIRST	MI	TITLE			YEAR	MO	DAY		

Facile

Name

St

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

November 16, 1989

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02114

RECEIVED - EPA
NOV 23 1989
COMPLIANCE BRANCH

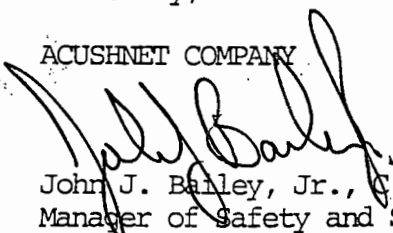
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of October 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 150-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

see INSTRUCTIONS on back

Remarks Titleist Golf Division
Laboratory

Telephone number (including area code) 508-997-2811

*The 12 open container grab samples
were collected over the sampling
day and examined, then combined
into one composite sample for analysis

(12-30) MA	(14-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		
89	10	01	89	10	31
YEAR	MO	DAY	YEAR	MO	DAY

REPORTING PERIOD: FROM

TO

PARAMETER		(3 card only) QUANTITY (35-45)			UNITS	NO. EX	(4 card only) CONCENTRATION (55-61)			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM			MINIMUM	AVERAGE	MAXIMUM				
FLOW	REPORTED	.175	.287	.334	MGD						0	30/30	24 Hr. contin
	PERMIT CONDITION												
OIL & GREASE	REPORTED		5.46		LBS/ DAY								
	PERMIT CONDITION	3.3		9.3									
T.S.S.	REPORTED		.48		LBS/ DAY								
	PERMIT CONDITION	9.0		18.0									
C.O.D.	REPORTED							14.36		MG/L	0	1/30	24 Hr. composi
	PERMIT CONDITION							MONITOR					
PH	REPORTED						5.9	6.7	7.0	STD. UNITS	2	12/30	24 Hr. composi
	PERMIT CONDITION							6.5					
C.R.	REPORTED							<0.05		MG/L	1/90	24 Hr. composi	
	PERMIT CONDITION												0.3
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, Robert			President		89 11 16			
LAST	FIRST	MI	TITLE		YEAR	MO		

COMPLIANCE DIV.
NOV 23 1989



ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

January 12, 1990

North Bosworth JTB90:30

JAN 19 1990

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of December, 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

January 25, 1990

Environmental Protection Agency
Permits Processing Section
P.O. Box 8127
Boston, MA 02114

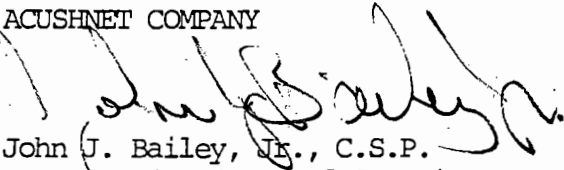
Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of December 1989.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY


John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RECEIVED - EPA

JAN 29 90

COMPLIANCE BRANCH

Facility or discharge location

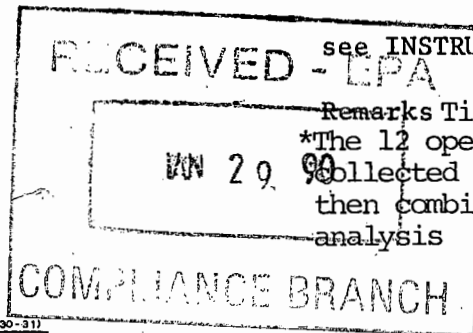
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

(2-3) MA	(4-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS



see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were
collected over the sampling day and examined,
then combined into one composite sample for
analysis

REPORTING PERIOD: FROM

(20-21)	(22-23)	(24-25)
8	9	1
YEAR	MO	DAY

TO

(26-27)	(28-29)	(30-31)
8	9	1
YEAR	MO	DAY

PARAMETER		(3 card only)				UNITS	(4 card only)				UNITS	(64-68)		(69-70)
		MINIMUM	AVERAGE	MAXIMUM	NO. EX		MINIMUM	AVERAGE	MAXIMUM	FREQUENCY OF ANALYSIS		SAMPLE TYPE		
FLOW	REPORTED	.34	.116	.43	MGD						0	30/30	24 hour continuous	
	PERMIT CONDITION													
OIL & GREASE	REPORTED		.07		LBS/DAY									
	PERMIT CONDITION	3.3		9.3										
T.S.S.	REPORTED		.29		LBS/DAY									
	PERMIT CONDITION	9.0		18.0										
C.O.D.	REPORTED				MG/L		6.51				0	1/30	24 hour composite	
	PERMIT CONDITION						MONITOR							
PH	REPORTED				STD. UNITS		6.2	6.6	6.6		2	12/30	24 hour composite	
	PERMIT CONDITION						6.5		8.0					
C.R.	REPORTED				MG/L		<0.05					1/90	24 hour composite	
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, Robert			President			9 0 1 25				
LAST	FIRST	MI	TITLE	YEAR	MO	DAY				

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name Acushnet Company, Rubber Division, Plant B
Street 744 Belleville Avenue
City New Bedford
State/Zip code Massachusetts 02742

see INSTRUCTIONS on back

Remarks

Telephone number (including area code) 508-997-2811

(2-3) MA	(4-16) 0003913	(17-19) 001
ST	PERMIT NUMBER	DIS

REPORTING PERIOD: FROM			TO		
(20-21) 8	(22-23) 9	(24-25) 12	(26-27) 8	(28-29) 9	(30-31) 12
YEAR	MO	DAY	YEAR	MO	DAY

PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX	(4 card only) CONCENTRATION				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	(62-63) MINIMUM			(64-65) AVERAGE	(66-67) MAXIMUM						
FLOW	REPORTED	.77	.244	.279	MGD							0	30/30	24 hr. continuous	
	PERMIT CONDITION														
OIL AND GREASE	REPORTED		1.05		LBS/ DAY										
	PERMIT CONDITION	3.3		9.3											
T.S.S.	REPORTED		0.4		LBS/ DAY										
	PERMIT CONDITION	9.0		18.0											
C.O.D.	REPORTED							19.27				0	1/30	24 hour composite	
	PERMIT CONDITION							MONITOR							
PH	REPORTED						5.5	6.4	6.1	STD. UNITS	2	12/30	24 hour composite		
	PERMIT CONDITION						6.5		8.0						
C.R.	REPORTED							0.05					1/90	24 hour composite	
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
DUBIEL, ROBERT		PRESIDENT & CEO		01/10/90			
LAST	FIRST	MI	TITLE	YEAR	MO		

JAN 19 1990